Attorney's Docket No.	D-1056
COMPAND DE	CY ADAT

PATENT

DATION AND POWER OF ATTORNEY

	COMBINED DECLARATION AND POWER OF ATTORNET
(ORIGI	INAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR C-I-P)
As a belo	w named inventor, I hereby declare that:
	TYPE OF DECLARATION
This decla	aration is of the following type: (check one applicable item below)
[3]	original
	design
	supplemental
NOTE: If	the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application, do <u>not</u> check next item; check appropriate one of last three items.
	national stage of PCT
NOTE: If	fone of the following 3 items apply, then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR C-I-P.
	divisional
	continuation
区	continuation-in-part (C-I-P)
	INVENTORSHIP IDENTIFICATION
	If the inventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.
I believe soriginal, fi	ence, post office address and citizenship are as stated below next to my name. I am the original, first and sole inventor (if only one name is listed below) or an irst and joint inventor (if plural names are listed below) of the subject matter which d and for which a patent is sought on the invention entitled:
Invent	TITLE OF INVENTION tory Monitoring and Dispensing System for Medical Items
Inven	
	SPECIFICATION IDENTIFICATION
the speci	fication of which: (complete (a), (b) or (c))
(a) 🗵	is attached hereto.
(b) 🗆	was filed on as [] Serial No. 0 / or [] Express Mail No., as Serial No. not yet known (if applicable).
I ë	Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67.

(Declaration and Power of Attorney [1-1]—page of 5)

(c)	was	described	and	claimed	in	PCT	International	Application	No.
				file	o t	n		and	i as
	amer	nded under P	CT A	rticle 19 or	ı	·		(if any).	

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information

which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56

(also check the following items, if desired)

- and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent, and
 - In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.

PRIORITY CLAIM (35 U.S.C. § 119)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

- (d) In no such applications have been filed.
- (e) \square such applications have been filed as follows.

NOTE: Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.

(Declaration and Power of Attorney [1-1]—page 2 of 5)

A. PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119

COUNTRY (OF INDICATE IF PCT)		DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119					
			☐ YES NO ☐					
			☐ YES NO ☐					
			☐ YES NO ☐					
			YES NO [
-			☐ YES NO ☐					
the bas division	NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation, divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION							
	OWER OF ATTORNEY FOR DIVISIONAL prior U.S. or PCT application(s) under 3		-P APPLICATION IOI DEIRIIL					
	POWER OF A	ATTORNEY						
I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)								
Ralph E Reg. No. 3								
(check the following item, if applicable)								
Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).								
	(Declaration a	and Power of Attorne	ey [1-1]—page 3 of 5)					

SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO: (Name and telephone number)

Ralph E. Jocke 231 South Broadway Medina, Ohio 44256

Ralph E. Jocke (216) 722-5143

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents Full name of sole or first inventor Max Fedor Α. (GIVEN NAME) (MIDDLE INITIAL OR NAME) FAMILY (OR LAST NAME) Inventor's signature U.S.A. 1994 Date November 21, Country of Citizenship Residence Wexford, Pennsylvania 2627 Glenchester Road Post Office Address_ Wexford, Pennsylvania 15090 Full name of second joint inventor, if any Colburn R. Eric (GIVEN NAME) (MIDDLE INITIAL OR NAME) FAMILY (OR LAST NAME) Inventor's signature U.S.A. November 21, 1994 Country of Citizenship Wexford, Pennsylvania Residence _ Post Office Address _ 2653 Black Oak Court Wexford, Pennsylvania 15090 •

(Declaration and Power of Attorney [1-1]—page 4 of 5)

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Robert		·	,		Gill:	
(GIVEN A	•	/2	INITIAL OR NAMEL	ho	FAMILY OR L	AST NAME)
	signature		11 11		1916 -	
DateN	November 21,	1994 Co	untry of Citizensh	ip	U.S.A.	
Residence		Lancaster	, Pennsylvania			
ost Offic	e Address	2001 Pine	Drive			
		Lancaster	, Pennsylvania	176	01	
	FO	RM A PART	OF THE FOLLOW OF THIS DECLAR	RATION	I	
[3]	Signature for fo	urth and su	bsequent joint inve	entors.	Number of	pages added
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			one joint inventor or cannot be appointed			
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	Authorization of	attorney(s) to	accept and follow	instruc	tions from r	epresentative.
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			☐ This declara	tion en	ds with this	page.

(Declaration and Power of Attorney [1-1]—page 5 of 5)

Full name of sixth joint inventor, if any

Inventor's signature _____

(GIVEN NAME)

Residence ______
Post Office Address _

	oint inventor, if any	
Daniel	W.	Neu
(GIVEN NAME)	(MIBDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
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	Pittsburgh, Pennsylvania 15	
Post Office Address	1000-8 Nineteen North Drive	
	Pittsburgh, Pennsylvania 15	237
Full name of fifth joir	nt inventor, if any	
R.	Michael	McGrady
(GIVEN NAME)	MIDDLE INITIAL OR NAME	FAMILY (OR LAST NAME)
nventor's signature _	R Michael Ma Disch	
	1994 Country of Citizenship	U.S.A.
•	Baden, Pennsylvania	
	218 Woodcroft Road	
	Baden, Pennsylvania 15005	

(MIDDLE INITIAL OR NAME)

Date _____ Country of Citizenship _____

FAMILY (OR LAST NAME)

Attorney's Docket No.

ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR C-I-P APPLICATION

(complete this part only if this is a divisional, continuation or C-I-P application)

CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S) UNDER 35 U.S.C. 120

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information that is material to the examination of this application, namely, information where there is substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, which occurred between the fiting date of the prior application(s) and the national or PCT international fiting date of this application.

			NS OR PCT INTERIORS. FOR BENEFIT					
U.S.	APPLICA	TIONS		Status (Check one)				
U.S. APPLIC	ATIONS	U.S.	FELING DATE	Patented	Pending	g Abandoned		
1. 0 8 / <u>009</u> , 0	55	01	/25/93		X			
2.0 8 / <u>186,2</u>	85	01	/25/94		X			
3.0 /								
PCT APPL	ICATIONS	DESI	GNATING THE U.S.		·			
PCT APPLI- CATION NO. DATE		.ING	U.S. SERIAL NOS. ASSIGNED (if any)					
4		-						
5								
6								
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(Added Page to Combined Declaration and Power of Attorney for Divisional, Continuation or C-I-P Application [1-2.1]—page 1 of 2)